DISCLOSURE SUMMARY PAG	E JASTINO AND	Fig. 1 St.	<b>DR-2</b> (Rev. 01/98)	DISCLOSURE REPORT
		, n	For Office Use O	
COMMITTEE NAME (Must be same as on Statement of Organ	nization Will 1 All 9:		Comm. #	9112
Toma County Republican CENT	Ral Committe	ا   مو	Indexed	
·			Audited	
IMPORTANT: Indicate type of committee you are reporting for:	4 10 a		Computer	
(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City C (8) Support State of Candidates.	4 )County/Local Candidate central Committee			
mence lives	641-484-25	99	Jan	11,200
SIGNATURE OF TREASURER (or person filing this report)	TELEPHONE	<del></del>	DATE S	
Routine Penalties Due For Late	Filed Reports Range	from \$	20 to \$800	
SEE INSTRUCTIONS ON BACK AND COMPLETE THE	FOLLOWING SENTENC	<u>E:</u>		
1 AM FILING A OCT 15 - Dec 31,2007	REPORT FOR AN/A (1) FIL	ECTION	//2\NON-FLECT	TION VEAR
(report date)	lr	idicate o	ne 2	HOR TEAK.
, ,				
CHECK IF AMENDMENT TO REPORT DATED		Local Co	ommittees, enter D	ate of Election
Check if this is final (termination) report and attach Notice of (You must continue to file reports until a Notice of Diss			& Local Committee ection is held	s, enter County in
	•			
STATEMENT	OF CASH ON HAND			
CASH ON HAND at the beginning of the reporting period. (This of all monies held by the committee. This amount MUS same as the cash on hand at the end of the last reporti or must be zero if this is first report filed.)	is the total T be the ng period,	\$	10.63	7.L
ADD TOTAL MONEY TAKEN IN THIS PERIOD	***************************************	Ψ	1070	~ <del>7</del> —
Schedule A: Cash Contributions total (Attach Schedule	e A)		65 25	_
Schedule F: Loans Received total (Attach Schedule F)				
Schedule H: Total Sales of Campaign Property (Attach				
(Schedule H applies to Candidates' Commi				
	SUB-TOT	AL \$	7618	7 d
SUBTRACT TOTAL MONEY SPENT THIS PERIOD			7618	20
Schedule B: Expenditures total (Attach Schedule B)			6000	
Schedule F: Loan Repayments total (Attach Schedule	F)	•••••		
CASH ON HAND at the end of this reporting period (if final reporting period (if final report be zero) (Attach DR-3)	t, balance must	\$ <u>.</u>	1618	,34
	· · · · · · · · · · · · · · · · · · ·			
UNPAID BILLS (From Schedule D - Attach Schedule D)				
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule				
OUTSTANDING LOANS (From Schedule F - Attach Schedule F	)	\$	0	··· · · · · · · · · · · · · · · · · ·
CANDIDATE COMMITTEES ONLY:				
CONSULTANT BREAKDOWN (Schedule G Attached?)	O-F- 4-4- 1D	_		S <u>X</u> NO
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach	ocnedule H)	\$		·

FOR INSTRUCTIONS, SEE BACK OF FORM

## For Instructions, See Back of Form

## CONTRIBUTIONS -- MONEY TAKEN IN

MONETARY (Rev. 06/97) RECEIPTS (Including candidate's personal funds) ☐ CHECK THIS BOX IF COMMITTEE NAME (Must be same as on Statement of Organization) AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	V IF FOR FUND- RAISER INCOME
9/24/01	ID# CK# 1826	Kari G, 1 bertson 1609 Rain bow DR, Cedar Fairs IR x013	None	\$ 35°	INCOME.
12/24/07	ID# CK#/388 ID#	Kari G, I bertson 1609 Rain bow DR, Cedar Fails, IR 5013 Putney for Sevate Po Box 454 Glad brook 14 50635		6500 -	
	ID# CK#				
	ID# CK#				·
	ID# CK#	••			
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID#				
1	ID#				

SUB-TOTAL

TOTAL (if last page of this schedule)

SCHEDULE

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page of (for Schedule A) FOR INSTRUCTIONS, SEE BACK OF FORM

## **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 09/97)	MONETARY EXPENDITURES
	CK THIS BOX IF

COMMITTEE NAME	(Must be sar	ne as on	Statement of	Organization)
	_			

Tama Courty R-publicur Certral Committee

	CANDIDATÉ	1		
DATE EXPENDED (MM/DD/YR)	CANDIDATÉ ID NUMBER (if applicable) AND PAC	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
	CHECK NUMBER			
12/2	ID#	HORbach FOR RepR.		
12/26/0-7	CK# <sub>1/3.5</sub>	Tama Ia 52339	DO NOTION TO Campagn	\$100000
121	ID#	11 factoris		
12/26/07	CK# 1136	Keyslone To	Donation to Compargn	5000
	ID#			
	CK#			
	ID#			-
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
			SUB-TOTAL	¢ , 0°

SUB-TOTA

TOTAL (if last page of this schedule)

\$ 6000

## THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

Page \_\_\_\_\_ of \_\_\_\_